DETAILED BU	JDGET FOR INIT		GET PER	lOD	TROW		TTIKOOOTT
PERSONNEL (Applicant organizati			% EFFORT		DOLLAR AN	MOUNT REQU	JESTED (omit cents)
NAME	ROLE ON PROJECT	TYPE APPT. (months)	ON	INST. BASE SALARY	SALARY REQUESTED	FRINGE BENEFITS	TOTALS
	Principal Investigator				1		
		†					
					_		
	SUBTOT	ſALS ——		\longrightarrow		1	
CONSULTANT COSTS						<u> </u>	
		_					
EQUIPMENT (Itemize)							
SUPPLIES (Itemize by category)							
·							
TRAVEL		_					
PATIENT CARE COSTS	INPATIENT						
ALTERATIONS AND RENOVATION	OUTPATIENT ONS (Itemize by categ	aory)					
OTHER EXPENSES (Itemize by ca	itegory)						
SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD						\$	
CONSORTIUM/CONTRACTUAL	DIRECT COSTS						
COSTS	FACILITIES AND A	ADMINISTF	RATION COS	STS			
TOTAL DIRECT COSTS FO	R INITIAL BUD	GET PEF	RIOD (Item	7a, Face Page) ———	→ \$	

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